102nd General Assembly Hearing Notice for Health

Subject Matter On: COVID-19 vaccinations

Scheduled Date: Feb 11, 2021 12:00PM

Testimony of James Henry an individual not representing others

Introduction

My name is James Henry. I am a 72-year-old resident of Elmhurst in DuPage county. The testimony I present is my own, as a concerned Illinois resident. My testimony is not intended to place blame on the actions taken by anyone dealing with the extraordinary challenges of the COVID-19 pandemic. I offer this testimony in the hopes that it will help us all reach our common goal of ending the COVID-19 pandemic and restoring normalcy sooner.

My testimony is directed toward increasing transparency of how providers of the COVID-19 vaccines are scheduling appointments for Illinois residents. I believe that increased visibility of the vaccine appointment scheduling process will reduce the frustration and anxiety currently experienced by Illinois residents.

My testimony provides suggestions on information that providers should make available to the public. I take no position on whether providing this information should be mandatory.

Definitions

Provider as used herein means an entity that administers COVID-19 vaccinations.

Recipient as used herein means a person seeking information about or scheduling of a COVID-19 vaccination.

Information as used herein means information about a provider's COVID-19 vaccination scheduling procedures.

Information should be accessible to all Illinois residents without technology barriers

All Information should be made available by means of telephone, whether by recorded message or live representative, in addition to any other form of Information availability.

All Information should be made available by all the same means that COVID-19 vaccination appointment scheduling is made available.

Information may be made available by additional means. Providers are encouraged to make Information readily accessible to their intended Recipients.

Information should be accessible at the highest level of the scheduling process

All Information should be made available with the least amount data collection from Recipient as is feasible. For example, Information that is specific to an administration location should require no more than providing a location of interest. It is acceptable to provide a list of all location specific information without requiring the Recipient to provide a location of interest.

Information should be provided about scheduling eligibility

Information should include current state and local department of public health eligibility requirements.

Information should include whether or not the Provider has eligibility requirements in addition to state and local department of public health eligibility requirements and what the Provider's additional eligibility requirements are, if any.

Information should include geographic eligibility requirements, such as living or working in a specific region.

Information should be provided about the Provider's scheduling availability

Information should include whether or not the Provider's scheduling process is currently accepting appointment requests.

Information should be provided about the Provider's scheduling procedure

Information should include a description of the Provider's scheduling method. Some examples of methods include:

- first come, first served
- wait list signup
- by invitation

Providers using wait lists should include Information about the estimated wait times for new entries on their wait list. Providers scheduling appointments by invitation should provide Information about their process for issuing invitations and the estimated time when invitations might be issued to invite groups.

If the Provider's scheduling process has a changing scheduling availability, the Information should announce that and include estimates of when availability changes will be announced.

Information should include the Provider's vaccination rate

Information should include the approximate number of doses the Provider has administered in a recent and representative 7-day period. Providers with multiple administration sites should make the vaccination rate available for each administration site.

Conclusion

Increasing the amount of information available to Illinois residents seeking COVID-19 vaccinations should help reduce the frustration of residents facing a patchwork of numerous Providers, each with their own procedure for scheduling appointments. It probably is preferable to reduce this patchwork. But increasing the transparency of the current system is something that should be possible to do quickly while the more challenging task of streamlining the vaccination scheduling process is underway.

Thank you for the opportunity to present my testimony to the Illinois State Senate Health Committee.

James Henry